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ABSTRACT

The interactional aspects of support within social networks of the elderly were investigated with a particular focus on the role which reciprocal exchanges play in defining the nature of the support channeled along the links in the network. The sample consisted of 50 adults, 55-83 years of age, living in an urbanized region of North Carolina. Interviews with the subjects covered several content areas including biographical background, adult biography, current circumstances, and data on the individual's support network. Results indicated that the daily rhythm of the lives of the subjects was founded on relationships of mutual concern and obligation between them and their kin, their friends, and their neighbors. Whatever form the relationship took (dyad or group), the support given centered around three main areas: (1) provision of goods and services contributing to daily functioning and household management; (2) provision of emotional support; and (3) special services supplied during times of crises or exceptional stress. (Author/HLM)

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OLD AGE IN AN URBAN SETTING:
COPING STRATEGIES, RECIPROCITY, AND PERSONAL NETWORKS

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At present, 75 percent of older people in the United States are living in their own residences in communities (Carp 1976). The present cohort of older people values its independence, which is symbolized by the ability to retain control over one's own lifestyle in one's own home (Butler 1975). Most older people suffer from one or more chronic diseases. As a social group, they face multiple economic and social disadvantages. Yet in spite of this, older people are under-users of social welfare programs, and at any one time only about five percent of the population over 65 resides in institutions. These facts offer testimony to the resilience and adaptability of older people.

A number of studies have confirmed the helping function of the informal network in the lives of most older people. For example, Shanas and Associates (1968) found that approximately two-thirds of their respondents in the United States received help from children, and a considerable minority relied on relatives as the sole source of assistance for everyday personal and household tasks. Friends and neighbors can also be a considerable source of mutual assistance, particularly in situations where a high density of elderly live near each other (Rosow 1967). Lopata (1975:35) views the informal network of kin, friends, and neighbors as a primary support system, involving the "giving and receiving of objects, services, and social and emotional supports defined by the receiver and giver as necessary or at least helpful in maintaining a style of life."

It is increasingly recognized that the presence or absence of an informal support network is a crucial predictor of the well-being and autonomy of older people. Immediate primary relationships offered by the network have been shown to directly benefit the physical and mental health of old people. National health statistics demonstrate that families provide approximately 80

percent of all home health care for elderly individuals in need of such support (National Center for Health Statistics 1972). Clark and Anderson (1967) postulated that a high degree of social involvement served to obviate readmission of older patients to psychiatric hospitals. The presence of close interpersonal ties and their availability as a source of support are salient factors in delaying if not preventing institutionalization of the chronically ill older person. Brody, Poulschock, and Masciocchi (1978) present data confirming that living arrangement, especially the presence of a family caring unit, is a critical factor in predicting the placement of chronically ill/disabled elderly.

While the existence and importance of these informal networks is a well-documented fact, knowledge about the cultural dimensions of the exchanges of support is relatively scarce. This paper applies an anthropological perspective to the general questions, "How are the elderly able to gain the support they need from their social networks in order to continue living in the community? What are the assumptions which direct their behavior?"

The studies of the network of older adults have so far focused mainly on the morphological dimensions of the network, i.e., the pattern of linkages between individuals. For instance, Lopata (1975) did a statistical examination of the categories of participants available in the social networks of elderly Chicago widows. Cohen and Sokolovsky (1979) measured several dimensions of the networks of Single Room Occupancy hotel (SRO) elderly residents and correlated these with measures of health. While studies such as these reveal significant information, the interactional aspects of networks, i.e., the content of relationships and their meaning for the persons involved, has been relatively neglected. We know very little at this point about how networks operate on the interpersonal level, and how older people construct adaptive

strategies within their social networks. We know even less about how the participants define their own actions. We do not know how the social networks of older people relate to their patterns of personal adaptation earlier in life.

It is the aim of this paper to examine the interactional aspects of support within social networks of the elderly. This paper focuses on the role which reciprocal exchanges play in defining the nature of the support which is channelled along the links in the networks. The article deals with the following topics: (1) the supportive content of the networks of the elderly living in the community and the dynamics of reciprocity which underly the transaction of support; (2) a contrast of two coping styles based on the use of reciprocity, and (3) the continuity between peoples' earlier patterns of social involvement and their use of support networks later in life.

Methods

The study sample--The sample consisted of 50 adults, 55-83 years of age, who live in an urbanized region (a cluster of three cities, the largest being about 200,000 population) of North Carolina. Potential study participants were identified at informal settings where older people congregate (local flea markets, federally-funded nutrition sites, senior citizens groups, and neighborhood clubs). The investigator spent several weeks to months at these sites as an observer/visitor. This allowed the participants to become somewhat familiar with her and facilitated subsequent requests for interviews. Once a basis for trust had been established, informants were obtained in three ways: (1) direct approach by the investigator; (2) referral by informants who had already been interviewed; and, (3) referral by other individuals at these sites (nutrition site manager, minister, family members) who know of the study and encouraged older individuals to participate.

While 50 individuals were interviewed, the investigator had the opportunity to talk at length with several times as many others. Statements by the informants themselves and the investigator's familiarity with a number of older people besides those in the sample suggest no reason to believe that the 50 people studied were atypical of the elderly of this region. However, since the sample was not randomly drawn, its representativeness cannot be guaranteed. At best, it represents the non-institutionalized elderly of this region who frequently participate in the type of settings where contacts were made.

Females constituted 66 percent of the sample and males 34 percent. The mean age for the group was 71 years. About half the group had an eighth grade or less education. Black adults composed 22 percent of the sample and 78 percent of the group was White. Forty percent of the adults were married and 38 percent were widowed. Thirty-eight percent were living alone. Fifty percent of the people had one or more children nearby. The majority of the sample, 78 percent, had lived in the same general area or neighborhood for 30 years or more. With the exception of one woman in her late eighties who lived in her daughter's household, all the people in the sample maintained their own residences. Most of these older adults (54 percent) were retired white collar workers (store clerk, school teacher, business manager, and insurance company employee), while the rest (38 percent) were blue collar workers (truck driver, furniture craftsman, textile weaver, and domestic). Eight percent, all women, had never been employed outside their homes. These older adults did not perceive their health as a serious problem, despite the fact that 54 percent reported having enough wrong to restrict some of their activities. Most of the people (56 percent) had low to modest incomes, subsisting on less than \$5,000 a year. However, 16 percent reported an income of over \$10,000 a year. In spite of the low incomes of the majority, only three individuals used social welfare programs.

Methodology--Data were collected by the investigator through a combination of structured interviews and participant observation. Fifty older adults were first interviewed about their backgrounds and their networks. The interviews covered the following content areas:

- 1) biographical background, including the informant's childhood family and socio-economic status, relationships with parents and siblings, and education;
- 2) adult biography, including work history, living arrangements, marriages, and family ties;
- 3) circumstances at the time of the interview, including current socio-economic status, health, living situation, work situation, daily routines, and interests and hobbies;
- 4) data on the informant's support network, including a list of the participants and the pattern of their relationships to each other and to the informant, the frequency of contact, the type of support routinely exchanged, and the expectations held about people occupying different roles (kin, friend, neighbor).

Subsequent to the initial interview, the investigator assumed the participant-observer mode distinctive of anthropology. She immersed herself in the activities of the networks in order to learn firsthand how to operate acceptably in accordance with informants' standards for dealing with one another. She made repeated visits to informants during different times of the week in order to sample their activities within different time frames. Often the investigator became involved in helping activities herself, such as when people asked her to take them places in her automobile.

No formal questions were asked; instead individuals were asked to comment upon events as they happened. Situations involving conflicts or misunder-

standings were especially useful; most informants could not explicitly articulate their expectations in regards to support, but they were acutely sensitive to any deviations or lapses in the system. Field notes were made upon leaving the scene.

Four lines of evidence were used as the basis for the inference of the informants' perspectives: (1) the verbal and non-verbal behavior surrounding support activities; (2) the explanation of events which had just transpired from the viewpoint of different participants; (3) spontaneous comments, particularly when there was some misunderstanding or conflict surrounding an event; and (4) the socialization of the investigator as she was drawn into some of the exchanges and learned how to behave appropriately. From the correspondence of these several lines of evidence emerged the categories relevant to the participants in explaining their social order.

The Pattern of Support

The daily rhythm of the lives of most of the people in this study is founded on the relationships of mutual concern and obligation between them and their kin, their friends, and their neighbors. In some instances, an older adult's exchanges with others take place within domestic alliances which span several local households and include kin as well as non-kin (usually immediate neighbors). In other instances, an old person makes exchanges with one other person in a separate dyad of support (such as a friendship). Whatever the form these relationships take, the support given centers around three main areas: 1) the provision of goods and services which contribute to day-to-day functioning and management of households, 2) provision of emotional support, and 3) special services supplied during times of crises or exceptional stress. The links in the network form the channels along which material, social, and emotional support flow.

On the material level, all kinds of routine daily tasks and problems, such as cleaning house, preparing food, going shopping, paying bills, and getting transportation to and from needed services, are shared. The pattern of support is on-going in nature, developing as people interact on a daily basis and acquire information about each others' needs. The resources, possessions, and services exchanged between individuals are intricately interwoven so that commodities are redistributed from households which have to those which have not. Here the adaptive function of the exchanges within the networks is especially evident.

More tangible but equal in importance to the material exchange is the sense of well-being and belonging promoted by social interaction in the network. A number of behaviors are specifically aimed at letting a member of the network know that she/he is cared for by others, and at providing a continual monitoring of the person's physical and emotional state. Phone calls from kin or friends provide a "checkup" on how one is doing. A visit or an overnight stay by adult children and grandchildren provides a sense of remaining engaged in family life. Birthdays and special occasions are often remembered and celebrated with a cake and a small gathering of intimate friends.

Times of crisis or special stress bring out intensified support from members of the network. For example, one common type of stress is illness and the recuperation period which follows. Family and friends make hospital visits, and when the sick person has returned home, they coordinate their efforts to provide him/her with meals several times daily as well as even more frequent "checkups" during the period of convalescence. Another common crisis encountered by older people, the death of a loved one, triggers a whole set of responses within the network which mobilizes to support the bereaved person

and family through the ordeal of the funeral and the mourning afterwards. The non-kin members of the bereaved person's network provide the family with food during the funeral and continuous company is given to the bereaved person for a period afterwards. In crises which mark a major transition from one phase of life to another, such as from being married to being widowed, the support of the network helps to ease the person's passage and assists in both the material and emotional adjustments which must be made.

Reciprocity

Cultural rules are a set of instructions for putting together elements of behavior (Spradley 1972:20). Certain implicit rules of reciprocity govern peoples' exchanges of support. These rules center around the making of offerings of gifts or favors in a manner intended to convey particular meanings and to obligate the receiver. The rules of reciprocity, once understood, can enable the network participant to influence the outcome of events and construct appropriate adaptive strategies. All the participants in the study shared the same set of rules; however, they differed considerably as to the types of strategies they based upon the rules. This section of the paper focuses on how the majority of people operated; in the next section, two individuals are contrasted to show the variability of strategies possible within the same system of meaning.

The most typical way people involve others in their daily domestic lives is by entering with them into an exchange relationship. Exchange transactions are used to initiate and maintain relationships and define the extent of obligation (Gouldner 1960, Foster 1963, Sahlins 1965). New people are recruited into the support network when they signal their willingness to be involved, by accepting objects, favors, or services on which they later make return. In

his classic interpretation of gift exchange in traditional societies, Mauss (1954) stresses the importance of gift-giving and repayment in the creation of obligation between individuals. Acceptance of an offering obligates the receiver and indicates a willingness to become bound to the giver. Reciprocity within the face-to-face context of the personal networks of the older people of this study operates in a fashion similar to that described by Mauss.

The most basic rule used by informants of this study is that a person who accepts a favor must eventually repay. Return of a favor implies a willingness to continue the exchanges and invest in a sense of mutual obligation. Assistance given is not necessarily expected to be returned in exact proportion or at any particular date. However, the recipient of goods has a diffuse obligation to reciprocate to the donor when necessary and/or if possible for the recipient. Reckoning of debts outstanding is never done overtly and is typically left out of the accounting. This does not mean that reciprocity creates no counter-obligation; only that the return is not stipulated as to time, quantity, or quality. The following excerpt taken from the field notes is typical of how the informants spoke of the necessity of making returns.

Mrs. Knox, a widow of 83, was expecting a visit from Mrs. Brooks (65), a former neighbor who is a nurse and who has been coming to Mrs. Knox's house every week for the past ten years to administer a vitamin B12 shot. As Mrs. Knox was packing food--homemade vegetable soup, slabs of corn bread, and fresh cole slaw, she explained to me, "This is for Mrs. Brooks. She works and she doesn't have time to make supper so this will help her. She never lets me pay her and I have to do something. She's been so good to me all these years."

In her statement, "I have to do something," Mrs. Knox is expressing the common-sense imperative that something given requires something returned. Reciprocity is the crucial factor in defining and maintaining the sense of obligation between older people and those with whom they exchange support.

New relationships are started when an offering is made in the hope that something will be returned; the initiator of the exchange is investing in the relationship and if a return is made, both parties enter an agreement to continue the exchange. At first, to signal intent, an individual might offer to another a small gift or an invitation to share some activity. A quite common way of initiating a relationship used by the participants in this study is to issue an invitation to enter the private space of one's home or apartment. This is usually interpreted as a highly significant gesture toward more personal involvement. As the example below illustrates, when an invitation is returned, a series of visits may result, and the basis for trust grows.

When Mrs. Bickers, a widow in her 60's moved into a new apartment complex, she was immediately invited for coffee by a neighbor, Mrs. Jackson, also a widow of the same age. The two women had a good initial impression of each other. They discovered they both like to play cards and watch the same television programs. As Mrs. Bickers left, Mrs. Jackson invited her to use her telephone until her own is installed.

A few days later, after her own apartment was somewhat in order, Mrs. Bickers returned the invitation to Mrs. Jackson. During the visit, Mrs. Bickers, who has noticed that Mrs. Jackson has difficulty getting about due to an arthritic hip, casually offered to pick up a few items at the grocery store when she did her own shopping. At first, Mrs. Jackson was uncomfortable with having her new friend perform this service and feared being "too much of a bother." However, she soon evolved a system of repaying Mrs. Bickers by giving her some of the groceries each time, such as a few pieces of fruit or a roll of toilet paper. Mrs. Bickers accepted these offers, and now this sort of exchange is carried on between them without question.

Beginning with a simple swapping of invitations, these two older women declared their intention of becoming each others' friends. Each acceptance of a gift or service serves to create a greater degree of involvement between the participants. Although at first exchanges may be symbolic or token in nature, the participants soon expand their exchanges to other areas which are more essential to daily functioning. As this happens, the parties form their own

agreements for how they will transact support. Once these agreements get established, as in the case of the grocery exchange between Mrs. Bickers and Mrs. Jackson, they become the customary way people use to interact with one another. The extent of their obligation to each other and the nature of their right and duties toward one another are defined through reciprocal exchanges. The process of exchange joins these individuals in personal relationships and determines which individuals will become effective as helpers for each other. Those engaged in reciprocal sharing are recruited primarily from among relatives, but friends may also take on obligations by engaging each other in exchanges. In some cases, particularly when immediate kin are unavailable, unrelated people may take on a kin-like obligation towards one another. Neighbors, although usually less involved, can be mobilized, especially during short-term crisis situations which require constant observation. Any individual, whether kin or non-kin, who is willing to commit himself to the regular exchange of resources, becomes eligible to be part of the supportive network. A person's network can include people of different ages and types of relationships. The old person may draw participants from age-peer friends and from neighbors, as well as people encountered in a variety of other settings. Individuals who share the same framework for interpreting the meaning of gifts or offerings as devices to create obligation may buy into the support system by making returns according to the rules governing reciprocity.

Sharing makes the households in a network interdependent and, as mentioned, serves to redistribute goods and services to where they are most needed. It was noted above that 56 percent of the people in the study have low incomes (less than \$5,000 annually). These incomes are fixed. These people are prevented from working by health problems, age discrimination in the job market, and Social Security regulations which place a ceiling on earnings that

can be made without penalty. Life savings are usually limited and are retained against a future time of increased need. Good management of income enables most to meet basic necessities such as food and shelter, but often little reserve is left for filling certain other kinds of needs. Individuals acting cooperatively can provide each other with services which contribute considerably to each others' well-being. A person who does not own a car can expect a ride with a friend who does; in turn, the person receiving the rides can provide services to which the friend has no access. In this way, people are able to anticipate a more or less continuous flow of goods and services in order to make dependable calculations of their day-to-day needs.

People are willing to obligate themselves in this system of reciprocal exchange because they can draw benefits from those who are obligated to them. Engaging in helping and sharing calls for a willingness to invest time and resources in the welfare of others. Obligation carries with it both privilege and duty. The duty is that persons to whom one is obligated can make demands and expect sacrifices to be made in response to their needs. The privilege is that the members of the support network can be called on in the same way to provide resources and make sacrifices. The network acts as a form of social insurance. If the giver has a need in the future, he/she has the right to draw on an investment already made.

Contrasting Styles of Adaptation

This section presents case studies to illustrate two major contrasting adaptive styles for using networks, both based on the manipulation of the same rules of reciprocity. In the predominant style discussed in detail in the previous section, delayed repayment compels the participants to trust one another. In the minority style practiced by a few individuals, immediate

repayment is used to short circuit any continuing obligation. Both styles are based on ideologies of the desirability of personal independence, differently defined.

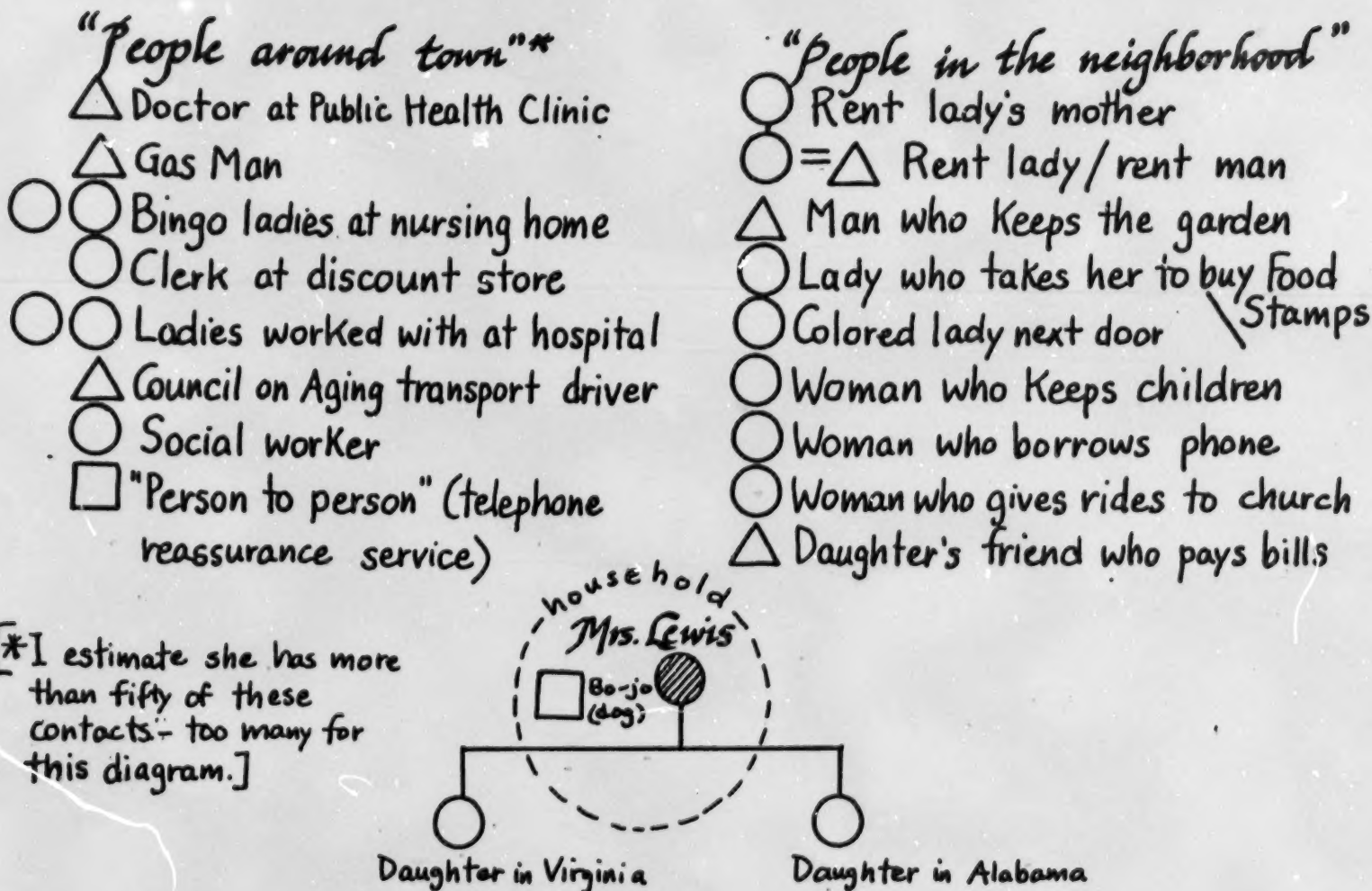
A majority of individuals in this study use what might be called the "personal/affective" style in their interactions within their networks. Independence for them is the ability to manage on the resources of one's immediate personal network and to maintain one's self-respect by being able to make repayments for support received. Through judicious offerings of support they create links enlivened with a strong, emotionally-charged sense of personal obligation and concern. The manner in which they give and receive invites further commitment. The motives expressed for giving are usually generosity and altruism. Little or no premium is placed upon immediate compensation; time can pass before a counter-gift or series of gifts need be repaid. As the need arises, reciprocity occurs.

Case 1

Mrs. Lewis (See Figure 1), a woman in her 80's, is someone whose strategies involve a continuous process of strengthening existing relationships and recruiting new individuals into her network by means of reciprocal exchange. Mrs. Lewis lives alone and has no immediate relatives in the city. She has to rely on neighbors and friends for a variety of services, which she, as a low-income elderly person, needs to live alone. Her needs are diverse and she depends on a large network of individuals, each of whom provides one limited aspect of her needs. For example, every Friday, a neighbor picks her up and takes her along when she does her own grocery shopping. Another helper who lives nearby sends her a plate of hot food about twice a week. Each month, a long-time acquaintance drives her to cash her SSI check and buy her food stamps. Another woman takes her to church on Sundays when the weather is good.

Since each of her contacts can supply only a small portion of her total needs, she is continually searching out new sources of aid. She expands the number of individuals whom she can call on by obligating people from diverse settings. Many of these people she first encountered in impersonal role-related interactions.

FIGURE 1: MRS. LEWIS' PERSONAL NETWORK



A partial list of people whom she can now tap for help includes the doctor at the public health clinic, the man who reads the gas meter, the two women who run the bingo games which she attends at a nursing home, and the clerk at the discount store.

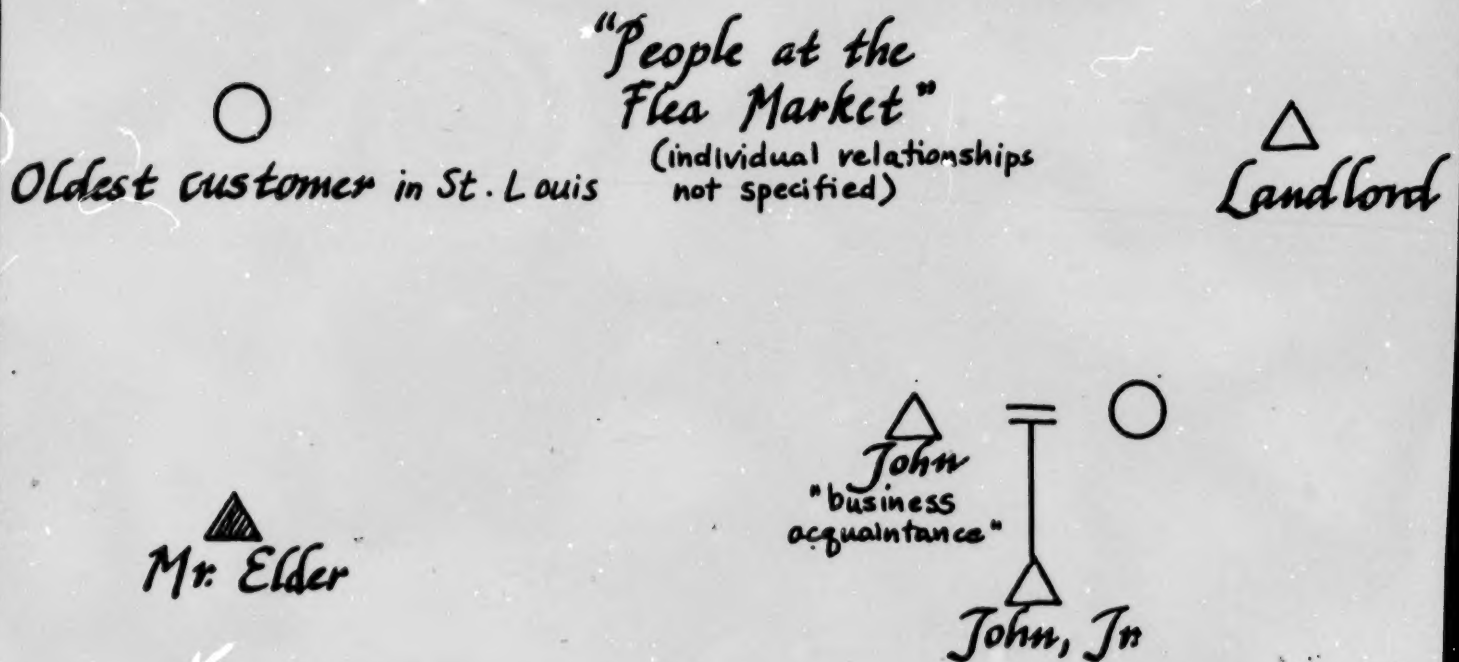
On the investigator's first visit, Mrs. Lewis suggested that they go together in the investigator's car to a local restaurant for lunch. When the meal was finished, Mrs. Lewis insisted on paying for both lunches. The investigator was uncomfortable with this, knowing that Mrs. Lewis had a marginal income and had used a portion of the Christmas money which her daughters had sent her to pay for the meal, but no amount of insistence would persuade Mrs. Lewis otherwise. When they were driving home, Mrs. Lewis commented to the investigator, "Someday, if we just happen to be riding around together, we might just end up over to the shopping mall." Soon the investigator was regularly taking her places in her car.

A second strategy, which might be called the "functional/utilitarian", was employed by individuals who conceptualize their independence as being best protected by maintaining maximum autonomy from others. These individuals tend to have a high need for privacy, to relate in a superficial way with others, and to isolate themselves from, and be resistant to, close social contacts. They form relationships for specific purposes; once these are accomplished the relationships go no further. The people exhibiting this style also understand the system of reciprocity but use it in a way which creates distance, rather than closeness between themselves and others. For services received, these individuals tended to make immediate returns, based on an impersonal medium, usually money. They were extremely concerned that the amount of repayment be exactly equivalent. They discussed their exchanges as being more business-like, rather than personal.

Case 2

Mr. Elder (See Figure 2), in his 70's, lives alone in a walk-up apartment in the older part of the city. He characterizes himself as a "loner" which he says he has been all his life. He never married. Although he moved from the Midwest to this city six years ago, his circle of acquaintances includes only a few people, most of them from a local flea market where he goes to buy and sell each

FIGURE 2: MR. ELDER'S PERSONAL NETWORK



week. For him, independence means being left alone to pursue the idiosyncratic lifestyle of a junk dealer, which has been his profession since early adulthood.

Mr. Elder, who doesn't own a car, is regularly given a ride to the flea market by Mr. John Jones. Mr. Elder calculates a fixed percentage of his daily sales and offers this to Mr. Jones as a form of repayment for rides and the sharing of a booth. He always repays the same day so he doesn't have any outstanding debts. Mr. Elder and Mr. Jones have known each other for over thirty years. They knew each other in the junk business in the Midwest. When Mr. Jones retired to North Carolina, he persuaded Elder to come to that area also. In spite of their knowing each other this long, Elder refers to Mr. Jones as a "business acquaintance." Mr. Elder says he hasn't any real friends since he was an adult, and that's the way he wants it, since friends make demands he doesn't want to meet.

Users of both styles understand the most basic principle of reciprocity, i.e., that something accepted implies an obligation until repayed. However, the way in which they handle their returns differs markedly and signals to others the outcomes which they desire. The individuals involved in the personal/affective style base their acts on overt expressions of generosity and concern. Their exchanges are not only functional, but carry the additional meaning of expressing caring. These individuals, although they keep a covert accounting of what is outstanding, are flexible in the time frame for repayment. On the other hand, participants in the functional/utilitarian style are scrupulous in their accounting of outstanding debts and generally provide immediate repayment. Although they may interact with the same individuals repeatedly, they have no intention of extending or deepening their personal obligation vis-a-vis these others so that it invades their private lives.

Continuity in Patterns

A striking amount of continuity is evident from the examination of the life histories of these individuals. There is a continuity or stability in the manner of relating to others within the personal network that extends from early adulthood into old age.

In response to the life history questions about involvement with family and others since early life, individuals exhibiting the personal/affective style showed a pattern of intimacy from early adulthood on. Throughout their adulthoods, they had built and strengthened relationships through exchanges of concern with others. Individuals like Mrs. Lewis have generally invested considerably in their networks in early and mid-adult life by helping others, and could now draw on this investment in dealing with the crises of old age. When they must accept help from others, they can still maintain a sense of self-esteem, since they know they are not accepting "charity."

The individuals like Mr. Elder have tended to reject intimate relationships and personal obligation all along. More so than the first group, they believe their independence means being responsible for solving their own problems. They do well on their own resources as long as no events occur which upset the balance of their adaptation. Ironically, the very ideology of independence which allows them to maintain a sense of self-worth while living in isolation may contribute to their being vulnerable when confronted with health problems or similar crises.

Implications

Two major styles of using the personal network for adaptation to old age were presented by the informants of this study. These styles are both methods of arriving at self-sufficiency. More needs to be understood about how the social contexts of growing old affect peoples' choice of styles. For instance, previous studies suggest that the functional/utilitarian style is more common among the poor elderly, who live in the inner city surrounded by strangers of different cultural, ethnic, and social backgrounds (Lally et. al. 1979). Those involved in the personal/affective style appear to live in stable situations surrounded by peers with similar social attributes.

For professionals attempting to promote the independence of older people through the delivery of social and health services, this variation in coping strategies needs to be kept in mind. Network theory has alerted us to the potential of reaching people along their own natural channels. Networks could be strengthened by bolstering the natural supports which already exist. In the case of people involved in the personal/affective style, this includes family, neighborhood and other social contacts. For those involved in the functional/utilitarian style, potential helpers are those with whom they regularly interact and who know their needs and schedules. These include landlords, store clerks, mail carriers, business acquaintances and other persons with whom they have frequent contact.

In using these natural channels, we must also understand the assumptions underlying the participants' behavior. The importance of being able to reciprocate cannot be underestimated. Both groups would benefit from services to the elderly which use the maximum amount of input and return from older people. A means of immediate reciprocation might prove essential for those who would not accept help under other conditions.

Finally, it is hoped that this paper will draw attention to the necessity for more research about the cultural dimensions of the networks of the aged. Such information can provide us with much insight into the behavior of older people as they participate in everyday settings.

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